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Docket Number (Optional) 1177011802

REISSUE APPLICATION DECLARATION BY THE INVENTOR	***************************************				
I hereby declare that:					
Each inventor's residence, mailing address and citizenship are stated below next	to their name.				
I believe the inventors named below to be the original and first inventor(s) of the s	subject matter which is described and				
laimed in patent number 5,554,121, granted September 10, 1996, and for which a reissue patent is sought on the					
invention entitled Intraluminal Catheter With High Strength Proximal Shaft,					
the specification of which					
is attached hereto.					
was filed on <u>August 28, 1998</u> as reissue application number <u>09/143,503</u> and was amended on <u>08/28/1998; 03/26/2001; 12/27/2005; 02/08/2007; 06/09</u> ((f applicable)	5/2007; 08/27/2008 .				
I have reviewed and understand the contents of the above-identified specification as amended by any amendment referred to above.	, including the claims,				
as an included by any anisotrom returned to above. 1 acknowledge the duty to disclose information which is material to patentability at 37 CFR 1.56.	s defined in				
$\hfill \square$ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 36 (or equivalent) listing the foreign applications.	5(b). Attached is form PTO/SB/02B				
I verily believe the original patent to be wholly or partly inoperative or invalid, for t below. (Check all boxes that apply.) by reason of a defective specification or drawing.	he reasons described				
by reason of the patentee claiming more or less than he had the right to clair	n in the natest				
	ii iii tile paterit.				
by reason of other errors.					
At least one error upon which reissue is based is described below. If the reissue reissue, such must be stated with an explanation as to the nature of the broadeni					
This is a broadening reissue.					
Claim 1 of U.S. Patent No. 5,554,121, as originally issued, requires as one element	nt a dilatation balloon.				
On information and belief, claim 1 of U.S. Patent No. 5,554,121 includes less that because the invention described in the specification of U.S. Patent No. 5,554,121	n the patentee is entitled to claim is not limited to balloon catheters.				
On information and belief, this error is being corrected by submitting, in this reissubroader than any original coam, as they would cover but are not limited to a cathe					

[Page 1 of 3]

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection file (and by the USP*C0 is process) an application. Confidentiality is governed by 39 U.S.C. 122 and 3* CPR-111* and 1*14. This childfold is a estimated to late as of minutes to complete, including estimating, preparing, and solumiting the completed application from the USP*C0 is estimated to late as of minutes to complete, including estimating, preparing, and solumiting the completed application from the USP*C0 is suggestions for reducing this burden, should be sent to the Chilel Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1456, Alexandric, V.A.22311-13450, D.O NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND. TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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(REISSUE APPLICA	ATION DECLARATION BY THE IN	IVENT	OR page 2	Docke 11770	Number (JS03	(Optional)
Note: To appoint a pow	this reissue application arose without an over of attorney, use form PTO/SB/81. ass: Direct all communications about the			on on the pa	art of the a	pplicant.
☐ The address assoc	ciated with Customer Number: 23,44	46				
OR						
Firm or Individual Name						
Address						
City			State		ZIP	
Country						
Telephone	WARI		Email			
submitted to the USPT before submitting them the public after public made in the applicatio available to the public Checks and credit carrille and therefore are not be the public to the public to the public and the public and the public and the public and the public that information and belief false statements and it such willfulf false state which this declaration if Full name of sole or first	all statements made herein of my of are believed to be true; and further tha he like so made are punishable by fine ments may jeopardize the validity of t	der rec advise publicate, the ublishe itted for own kr at these and it	lacting such id that the re ation reques a record fron d application r payment pu iowledge are statements mprisonment	personal in cord of a pa t in complia n an aband n or an issu urposes are e true and were made t, or both, ur	formation for the standard application of the standard application of the standard all standard	from the document aation is available to 37 CFR 1.213(a) is ication may also be (see 37 CFR 1.14) and in the application atements made on nowledge that willfu. S.C. 1001, and that
Robert D. Ainsworth Inventorie signature	2 1 ° A	Date				
Kobert a	D. Jensworth	De	семве	r 10,	2008	
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Additional joint inventors or legal representative(s) are named on separately numbered sheets form PTO/SB/02A or 02LR attached hereto.

PTO/SB/02A (07-07) Approved for use through 06/30/2010. OMB 0651-0032

Approved for use through 06/30/2010. OMB 0691-1025

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional Joint Inventor, if any			A petition has been filed for this unsigned inventor-					
Given Name (first and middle [if any])			Family Name or Surname					
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Inventor's Signature					Date			
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City Mountain View	State CA	ZIP	95066	Cor	US			
Name of Additional Joint Inventor, if any				his unsigned inventor				
Given Name (first and midd	lle [if any])		Family Name or Surname					
Inventor's Signature				Date				
Residence: City	State	Cou	Country		Citizenship			
Mailing Address								
Malling Address								
City	State	Zip	Zip Country		untry			
Name of Additional Joint Inventor, if any			A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature Date								
Residence: City	State	Cou	Country		Citizenship			
Mailing Address								
Mailing Address								
City	State		Zip Co		ountry			
								

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